

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA

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In re:

Diocese of Winona-Rochester,

Debtor.

Bankruptcy Case No. 18-33707  
Chapter 11 Case

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**ORDER (I) GRANTING EXPEDITED RELIEF; (II) ESTABLISHING DEADLINES  
FOR FILING PROOFS OF CLAIM; (III) APPROVING SEXUAL ABUSE PROOF OF  
CLAIM FORM; (IV) APPROVING FORM AND MANNER OF NOTICE; AND (V)  
APPROVING CONFIDENTIALITY PROCEDURES**

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This case is before the court on the motion of the debtor for an order establishing deadlines for filing proofs of claim, approving proof of claim forms, approving the form and manner of notice, and approving confidentiality procedures in connection with the filing of proofs of claim.

Based on the motion and the file,

**IT IS ORDERED:**

1. The debtor's request for expedited relief is granted.
2. The debtor's motion for an order establishing deadlines for filing proofs of claim, approving proof of claim forms, approving the form and manner of notice, and approving confidentiality procedures in connection with the filing of proofs of claim is granted as set forth in this order.

**FORM**

3. The Sexual Abuse Proof of Claim Form, the Sexual Abuse Claims Filing Deadline Notice, and the Publication Notice, in the forms attached as Exhibits A, B, and C are approved. Creditors with claims other than sexual abuse claims may use the official proof of claim form 410.

### **NOTICE**

4. The form and manner of notice as approved in this order fulfill the notice requirements of the Federal Rules of Bankruptcy Procedure and the local rules of this court. Notice of the filing deadlines in the form and manner attached is fair and reasonable and will provide sufficient notice to all creditors of their rights and obligations in connection with claims they may assert in this case. Accordingly, the debtor is authorized and directed to serve and publish the notices in the manner described in this order.

### **DEADLINE FOR TIMELY FILING CLAIMS**

5. The last day to timely file a proof of claim in this case is set as April 8, 2019. This deadline applies to all persons, including sexual abuse claimants, and entities.

6. The last day for any governmental unit to file a timely proof of claim is also April 8, 2019.

### **REQUIREMENTS FOR SEXUAL ABUSE PROOF OF CLAIM FORMS**

7. Persons asserting claims arising from sexual abuse as that term is defined in Minnesota Statutes § 541.073(1), as well as from molestation, rape, undue familiarity, sexually related physical, psychological or emotional harm, or contacts or interactions of a sexual nature between a child and an adult, or a non-consenting adult and another adult for which such persons believe that the debtor may be responsible shall file a Sexual Abuse Proof of Claim Form (Exhibit A).

8. The Clerk of Court shall maintain a copy of each Sexual Abuse Proof of Claim Form in electronic form in accordance with the confidentiality procedures outlined below. The Clerk of Court will assign each Sexual Abuse Proof of Claim Form a number and shall list that

number on the public docket without a link to the Sexual Abuse Proof of Claim Form and without the name.

9. Sexual Abuse Proof of Claim Forms shall be submitted pursuant to the following confidentiality procedures:

- i. Sexual Abuse Claimants shall mail or deliver the original of a Sexual Abuse Proof of Claim Form to the Clerk of the United States Bankruptcy Court for the District of Minnesota at the following address: 200 Warren E. Burger Federal Building and United States Courthouse, 316 North Robert Street, St. Paul, MN 55101, Attention: Barbie.
- ii. Sexual Abuse Proof of Claim Forms maintained by the Clerk of Court will not be available for viewing or copying unless otherwise ordered by the court. This confidentiality procedure is for the benefit of the Sexual Abuse Claimants. Accordingly, Sexual Abuse Claimants may elect to make any of the information contained in a Sexual Abuse Proof of Claim Form public, even if they elected to file the Sexual Abuse Proof of Claim Form confidentially. If a Sexual Abuse Claimant affirmatively indicates by checking the box in Part 1 of the Sexual Abuse Proof of Claim Form that the claim is to be made public, that claim will be added to the public claims register. If no box is checked or if both boxes are checked on a Sexual Abuse Proof of Claim Form, that form shall not be made public.
- iii. Sexual Abuse Proof of Claim Forms submitted by Sexual Abuse Claimants shall be held and treated as confidential by the debtor and its counsel and upon request to the permitted parties listed below, subject to each permitted party executing and returning to the debtor's counsel a confidentiality agreement, and to such other persons as the court determines; provided, however, that all parties with access to the Sexual Abuse Proof of Claim Forms shall agree to keep the information provided in a Sexual Abuse Proof of Claim Forms confidential (unless the Sexual Abuse Claimant elects otherwise in Part 1 of the Sexual Abuse Proof of Claim Form). Permitted parties may obtain copies of Sexual Abuse Proof of Claim Forms in accordance with the terms of an applicable confidentiality agreement only from counsel for the debtor, and shall not seek or obtain such documents from the clerk of court.
- iv. Permitted parties include: (a) counsel for the debtor; (b) officers and employees of the debtor who are necessary to assist the debtor and its counsel address issues with respect to Sexual Abuse Claims; (c) counsel for the committee of unsecured creditors; (d) insurance companies or their successors, including any authorized claim administrators of such insurance

companies, that issued or allegedly issued policies to the debtor and their reinsurers and attorneys; (e) any unknown claims representative appointed by the court in this case; (f) any mediator, special arbitrator or claims reviewer appointed by the court to review and resolve the Sexual Abuse Claims; (g) any trustee appointed to administer payments to Sexual Abuse Claimants; (h) authorized representatives of a department of corrections with respect to a Sexual Abuse Claim by a Sexual Abuse Claimant who is incarcerated but only to the extent such disclosure is authorized under applicable non-bankruptcy law; (i) members of the committee of unsecured creditors and their personal counsel (after the Sexual Abuse Proof of Claim Form has been redacted to remove the Sexual Abuse Claimant's name, address and any other information identified in Part 2(A) or 3 of the Sexual Abuse Proof of Claim Form and the signature block); (j) law enforcement in the city or county where the Sexual Abuse Claim arose; (k) auditors of the United States Conference of Catholic Bishops charged with preparing annual audits of diocesan compliance with the Charter for the Protection of Children and Young People; (l) each parish identified in a sexual abuse proof of claim, and the following personnel from the identified parish: (i) the pastor; (ii) the trustees serving on the parish finance council; (iii) the chairperson of the parish finance council; (iv) the business administrator of the parish; (v) attorneys serving as counsel to the parish; and (vi) the parish's insurance company; and (m) such other persons as the court determines should have the information in order to evaluate Sexual Abuse Claims only upon a motion by the debtor or the committee of unsecured creditors.

10. In addition to the foregoing, counsel for the debtor and the committee of unsecured creditors are authorized to provide copies of an individual claimant's Sexual Abuse Proof of Claim and any other documents filed in connection with the individual claimant's Sexual Abuse Proof of Claim to counsel representing such individual claimant. Permitted parties and their attorneys shall be authorized to review proofs of claim upon execution of a confidentiality agreement agreed upon by the debtor and the committee of unsecured creditors or pursuant to further order of the court. The court may approve additional permitted parties upon motion.

11. Access to the Sexual Abuse Proof of Claim Forms extends only to the individual who executes the confidentiality agreement. A separate confidentiality agreement must be signed by each individual who seeks access to the records on behalf of a permitted party.

### **TIMING AND FORM OF NOTICE**

12. As soon as reasonably practicable after the entry of this order, the Clerk of Court shall give notice by United States mail, first-class postage prepaid, or by electronic means, of the non-tort claim filing deadline to (a) the United States Trustee for the District of Minnesota; (b) counsel to the committee of unsecured creditors; (c) all persons and entities that have filed a notice of appearance in this case; (d) all persons and entities included in the creditor mailing matrix on file in this case; and (e) all persons and entities that have previously filed proofs of claims.

13. As soon as reasonably practicable, but in any event no later than five business days after the entry of this order, the debtor shall serve by United States mail, first-class postage prepaid, the Sexual Abuse Claim Filing Deadline Notice (Exhibit B) and the Sexual Abuse Proof of Claim Form (Exhibit A) on the United States Trustee, and on known Sexual Abuse Claimants who have:

- i. Filed pending lawsuits against the debtor alleging that they were sexually abused by employees or agents of the debtor or by clergy previously assigned to the debtor or any others for whom the debtor may be liable;
- ii. Provided to the debtor under Minn. Stat. § 549.09 a written notice of claim of sexual abuse by employees or agents of the debtor or by clergy previously assigned to the debtor or any others for whom the debtor may be liable;
- iii. Contacted the debtor to claim that they were sexually abused as a minor by employees or agents of the debtor or by clergy previously assigned to the debtor or any others for whom the debtor may be liable;
- iv. Are otherwise known to the debtor to be a Sexual Abuse Claimant through reasonably-ascertainable records.

14. The service of the Sexual Abuse Claim Filing Deadline Notice and Sexual Abuse Proof of Claim Form on Sexual Abuse Claimants shall be accomplished through such Sexual Abuse Claimants' attorneys, if previously identified as counsel for such Sexual Abuse Claimant in

connection with a Sexual Abuse Claim, and directly on all other known potential Sexual Abuse Claimants that have been identified and located by the debtor through reasonably diligent efforts.

15. The Publication Notice and the Sexual Abuse Claim Filing Deadline Notice shall include a reference to this court's website ([www.mnb.uscourts.gov](http://www.mnb.uscourts.gov)) where all claim forms shall be made available.

16. The service outlined above shall constitute service on all known creditors of the debtor. All other creditors of the debtor shall be deemed to be unknown for the purpose of service of notice of the Claim Filing Deadline.

17. The debtor shall also provide notice of the Claim Filing Deadline established in this order by causing a copy of the Publication Notice (Exhibit C) to be published as follows:

- i. Publication four times in each of the following publications, with the first publication to occur within thirty days of the service of the claim filing deadline packages, the second publication to occur approximately thirty days after the first notice, the third publication to occur approximately thirty days after the second notice, and the fourth publication to occur approximately thirty days after the third notice:
  - USA Today – National Edition
  - National Catholic Reporter (National Catholic Publication)
  - The National Catholic Register (National Catholic Publication)
  - The Prairie Catholic (Regional Catholic Publication)
  - Minneapolis Star Tribune
  - St. Paul Pioneer Press
  - The Minnesota Daily
  - Post-Bulletin (Rochester)

- Winona Daily News
- The Free Press (Mankato)
- Independent (Marshall)
- Waseca County News
- Ottawa Peoples Press
- Albert Lea Tribune
- Worthington Globe
- Spring Valley News / Bluff Country Newspaper Group
- Argus Leader (Sioux Falls)
- Sioux Falls Business Journal
- Bishop's Bulletin (Diocese of Sioux Falls)
- La Crosse Tribune
- Catholic Life (Diocese of La Crosse)
- Austin Daily Herald
- Nobles County Review
- Steele County Times
- Faribault County Register
- The Caledonia Argus
- Chatfield News (Bluff Country News)
- The Byron Review
- Fairmont Sentinel
- Fulda Free Press
- Jackson County Pilot

- Janesville Argus
  - Houston County News
  - Winona Post
  - Lake City Graphic
  - Wabasha County Herald
  - Plainview News
  - The St. Charles Press
  - Lewiston Journal
  - Rock County Star Herald
  - Lake Region Times (Madison Lake)
  - Maple River Messenger (Mapleton area)
  - Tri-County Record (Bluff Country News – Rushford area)
  - St. James Plaindealer
  - Stewartville Star
  - Wells Mirror
  - Cottonwood County Citizen (Windom)
  - Pipestone County Star
- ii. The debtor will request that the Publication Notice is published in the above listed publications in a location other than among the standard legal notices.
- iii. In addition to the Publication Notice, the debtor will send copies of the Sexual Abuse Claim Filing Deadline Notice to the publications listed above and to the following:
- The Associated Press of Minnesota
  - WCCO-AM

- Minnesota Public Radio
- KARE-TV
- KMSP-TV
- WCCO-TV
- KTTC-TV (Rochester)
- KAAL-TV 6 (Rochester)
- KIMT-TV 3 (Rochester)
- KSFY (Sioux Falls TV)
- KSOO (Sioux Falls Radio)
- KELO (Sioux Falls TV)
- KELO (Sioux Falls Radio)
- KDLT (Sioux Falls TV)
- WIZM (La Crosse Radio)
- WKBT (La Crosse TV)
- WLAX (La Crosse TV)
- WXOW (La Crosse TV)
- KATE (Albert Lea Radio)
- KAUS (Austin Radio)
- KEYC Mankato (TV)
- KSUM (Fairmont Radio)
- KKOJ (Jackson-area Radio)
- KLQL (Luverne and Worthington Radio)
- KRFO (Owatonna Radio)

- Christensen Broadcasting (Pipestone and Slayton Radio)
- Each diocese in Minnesota

18. The debtor shall provide further notice of the Claim Filing Deadline by taking the following measures:

- i. Within five business days of the entry of the order approving this motion, the Diocese will post the component parts of the Sexual Abuse Claim Filing Package and the deadline for filing non-tort claims on its public website: <https://www.dowr.org>;
- ii. Within five business days of the entry of the order approving this motion, the Diocese will provide a copy of the Publication Notice and the component parts of the Sexual Abuse Claim Filing Package to the Survivors Network of the Abused Priests and request that it post the same on its website: <http://www.snapnetwork.org/>.
- iii. Within five business days of the entry of the order approving this motion, the Diocese will provide a copy of the Publication Notice and the component parts of the Sexual Abuse Claim Filing Package to Jeff Anderson and Associates, P.A., Noaker Law Firm LLC, and Stinson Leonard Street LLP and request that they post the same on their respective websites: <http://www.andersonadvocates.com/>, <http://noakerlaw.com/>, and <http://www.stinson.com>.
- iv. The Diocese will maintain a telephone number published on its website (<https://www.dowr.org>) that may be used to ask questions and request copies of the Sexual Abuse Claim Filing Package.
- v. Within two weeks of the service of the Sexual Abuse Claim Filing Package, the Diocese will provide a copy of the Publication Notice and the component parts of the Sexual Abuse Claim Filing Package to the following offices/entities and request that each recipient publicly post such notice until the expiration of the Claim Filing Deadline: (1) the Minnesota Attorney General, (2) the county attorney, the county administrator, and sheriff's department for each of the counties within the Diocese's geographical area, (3) the Minnesota Department of Health's locations within the Diocese's geographical area, and (4) each hospital in the Diocese's geographical area.
- vi. The Diocese will send a letter, on the Diocese's letterhead and signed by an office of the Diocese, to each parish located in the Diocese's geographical area requesting that such parish display the Publication Notice and the Sexual Abuse Claim Filing Deadline Notice in a prominent location within

the church or school. The letter will also request that notices be published once a month in the parishes' weekly bulletins until the Claim Filing Deadline. The letter will also request that each pastor, canonical administrator, or parochial vicar remind parishioners of the availability of information concerning the Claim Filing Deadline. The letter will also request that parishes disseminate the Publication Notice and the Sexual Abuse Claim Filing Deadline Notice by e-mail to their respective distribution lists.

- vii. The Diocese will mail a copy of the Sexual Abuse Claim Filing Deadline Notice to all licensed alcohol and addiction treatment centers in the state of Minnesota, as identified by counsel for the Committee, and to persons identified by counsel for the Committee as licensed therapists presently working with sexual abuse claimants.
- viii. The Bishop shall request that each pastor, canonical administrator, or parochial vicar read a letter from the Bishop at least two times before the Claim Filing Deadline. The letter from the Bishop shall state that the Bishop requested that the letter be read, that the Claim Filing Deadline is April 8, 2019, that the Bishop requests that people inform their family members about the Claim Filing Deadline, and that the filing of a claim may be done confidentially.

19. Each request described in paragraph 18(v) and (vi) above shall be on the debtor's letterhead and signed by an officer of the debtor. The request described in 18(vi) above, shall include a space at the bottom for the recipient to indicate whether it will comply with the request and a stamped self-addressed return envelope. The debtor will report on compliance to the committee of unsecured creditors.

20. In addition, the Clerk of Court shall post the Sexual Abuse Proof of Claim Form, the Sexual Abuse Claims Filing Deadline Notice and Publication Notice on the website for the United States Bankruptcy Court for the District of Minnesota by adding a link on the court's home page ([www.mnb.uscourts.gov](http://www.mnb.uscourts.gov)) to easily access filing deadline information.

Dated *December 7, 2018*

/s/ Robert J. Kressel

United States Bankruptcy Judge



**EXHIBIT A**

**SEXUAL ABUSE PROOF OF CLAIM FORM**

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA

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In re:

Diocese of Winona-Rochester,

Debtor.

Bankruptcy Case No. 18-33707  
Chapter 11 Case

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**SEXUAL ABUSE PROOF OF CLAIM FORM**

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**IMPORTANT:  
THIS FORM MUST BE *RECEIVED* BY NO LATER THAN  
APRIL 8, 2019**

Carefully read the instructions included with this Sexual Abuse Proof of Claim Form and complete ALL applicable questions. Please print clearly and use blue or black ink. Please send the original to the U.S. Bankruptcy Court Clerk at the following address:

Office of the Clerk of Court  
U.S. Bankruptcy Court District of Minnesota  
200 Warren E. Burger Federal Building and United States Courthouse  
316 North Robert Street  
St. Paul, MN 55101  
Attn: Barbie

**THIS PROOF OF CLAIM IS FOR CLAIMANTS OF SEXUAL ABUSE ONLY.  
YOU MAY WISH TO CONSULT AN ATTORNEY REGARDING THIS MATTER.**

A sexual abuse claim includes any claim arising from sexual abuse as that term is defined in Minn. Stat. § 541.073(1), as well as from molestation, rape, undue familiarity, sexually-related physical, psychological, or emotional harm, or contacts or interactions of a sexual nature between a child and an adult or a non-consenting adult and another adult for which such persons believe that the Diocese of Winona-Rochester (the "Diocese") may be liable.

**TO BE VALID, THIS PROOF OF CLAIM MUST BE SIGNED BY YOU OR YOUR ATTORNEY. IF THE SEXUAL ABUSE CLAIMANT IS DECEASED OR INCAPACITATED, THE FORM MAY BE SIGNED BY THE SEXUAL ABUSE CLAIMANT'S REPRESENTATIVE OR THE ATTORNEY FOR THE ESTATE. IF THE SEXUAL ABUSE CLAIMANT IS A MINOR, THE FORM MAY BE SIGNED BY THE SEXUAL ABUSE CLAIMANT'S PARENT OR LEGAL GUARDIAN, OR THE SEXUAL ABUSE CLAIMANT'S ATTORNEY. IF THE SEXUAL ABUSE CLAIMANT DIES AFTER THE SUBMISSION OF THIS FORM, BUT BEFORE THE CLAIM IS**

**RESOLVED, NOTIFICATION OF THE DEATH MUST BE PROVIDED TO THE COURT AT THE ADDRESS ABOVE.**

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to five years, or both. 18 U.S.C. §§ 152, 3571.

**UNLESS YOU INDICATE OTHERWISE IN PART 1 BELOW, YOUR IDENTITY WILL BE KEPT STRICTLY CONFIDENTIAL, UNDER SEAL, AND OUTSIDE THE PUBLIC RECORD. HOWEVER, INFORMATION IN THIS CLAIM WILL BE PROVIDED, PURSUANT TO COURT-APPROVED CONFIDENTIAL GUIDELINES, TO COUNSEL FOR THE OFFICIAL COMMITTEE OF UNSECURED CREDITORS AND OTHER COURT-APPROVED THIRD PARTIES, IN ORDER TO EVALUATE THE CLAIM.**

**YOUR PROOF OF CLAIM MAY BE DISPUTED OR HONORED IN WHOLE OR IN PART. THE DIOCESE RESERVES THE RIGHT TO OBJECT OR TO ASSERT OFFSETS OR DEFENSES AGAINST ANY FILED PROOF OF CLAIM.**

**PART 1: CONFIDENTIALITY**

**THIS SEXUAL ABUSE PROOF OF CLAIM FORM (ALONG WITH ANY ACCOMPANYING EXHIBITS AND ATTACHMENTS) WILL BE MAINTAINED AS CONFIDENTIAL UNLESS YOU EXPRESSLY REQUEST THAT IT BE PUBLICLY AVAILABLE BY CHECKING THE BOX AND SIGNING BELOW.**

- ☐ I want my Proof of Claim (along with any accompanying exhibits and attachments) to be kept confidential.
- ☐ I want my Proof of Claim (along with any accompanying exhibits and attachments) to be made public.

Please verify this election by signing directly below:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

**PART 2: IDENTIFYING INFORMATION**

**A. Sexual Abuse Claimant**

\_\_\_\_\_  
First Name Middle Initial Last Name Jr/Sr/III

Mailing Address (If Party is incapacitated, is a minor, or is deceased, please provide the address of the individual submitting the claim. If you are in jail or prison, your current address.)

|      |             |                        |                                |
|------|-------------|------------------------|--------------------------------|
| City | State/Prov. | Zip Code (Postal Code) | Country<br>(if other than USA) |
|------|-------------|------------------------|--------------------------------|

Telephone No(s):

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email address: \_\_\_\_\_

If you are in jail or prison, your identification number: \_\_\_\_\_

May we leave voicemails for you regarding your claim: ☐ Yes ☐ No

May we send confidential information to your email: ☐ Yes ☐ No

Birth Date: \_\_\_\_\_ ☐ Male ☐ Female  
Month Day Year

Last Four Digits of Social Security Number: XXX-XX- \_\_\_\_\_

Any other name(s) or alias(es) by which the Sexual Abuse Claimant has been known:

**B. Sexual Abuse Claimant's Attorney (if any – do not list counsel for the Diocese or the Official Unsecured Creditors Committee):**

\_\_\_\_\_  
Law Firm Name

\_\_\_\_\_  
Attorney's First Name Middle Initial Last Name

\_\_\_\_\_  
Street Address

|      |             |                        |                                |
|------|-------------|------------------------|--------------------------------|
| City | State/Prov. | Zip Code (Postal Code) | Country<br>(if other than USA) |
|------|-------------|------------------------|--------------------------------|

\_\_\_\_\_  
Telephone No. Fax No. Email Address

**PART 3: BACKGROUND INFORMATION**

1. Are you currently married?

☐ Yes ☐ No (if “Yes,” please identify the name of your spouse and marriage date)

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2. Have you been previously married?

☐ Yes ☐ No (if “Yes,” please identify the name of your former spouse and, as applicable, the date(s) of any dissolution, divorce, separation, or widowhood)

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3. Do you have children?

☐ Yes ☐ No (if “Yes,” please identify their names and birthdates. If any children have died, please provide their date of death)

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4. What schools have you attended? For each school, please identify the months and years of your attendance. If you cannot recall the exact months when you began or ended each school year, please identify the season (fall, winter, spring, summer).

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5. Have you received a diploma or degree from any of the schools listed above?

☐ Yes ☐ No (if “Yes,” please identify each diploma or degree that you received and the year you received it)

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6. Have you served in the armed forces?

☐ Yes ☐ No (if "Yes," please identify the branch of service, the dates you served, and, if you have been discharged, the type of discharge you received)

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7. Are you currently employed?

☐ Yes ☐ No (if "Yes," please identify the name of the organization where you are employed, the date of your employment began, and your job title)

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8. What is your employment history? Please provide the following information about each place you have previously been employed: (i) the name of the organization where you were employed; (ii) the dates of employment; (iii) your job title(s); and (iv) your reason for leaving the place of employment.

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9. Have you been self-employed?

☐ Yes ☐ No (if "Yes," please provide your job responsibilities, any business name you used, and the dates of this business)

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10. Are you retired?

☐ Yes ☐ No (if "Yes," please identify when you retired)

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11. Part 4 below will ask you about the nature of your complaint against the Diocese of Winona-Rochester. Other than the incident(s) of sexual abuse described in Part 4, have you ever been sexually abused by anyone else? If “Yes,” please describe this abuse, including the date of the abuse and identify the abuser.

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**PART 4: NATURE OF ABUSE**

**(Attach additional separate sheets if necessary)**

**NOTE: IF YOU HAVE PREVIOUSLY FILED A LAWSUIT AGAINST THE DIOCESE OF WINONA-ROCHESTER IN STATE OR FEDERAL COURT, YOU MAY ATTACH THE COMPLAINT. IF YOU DID NOT FILE A LAWSUIT OR IF THE COMPLAINT DOES NOT CONTAIN ALL OF THE INFORMATION REQUESTED BELOW, YOU MUST PROVIDE THE INFORMATION BELOW.**

1. Who committed each act of sexual abuse?

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2. What is the position, title, or relationship to you of the abuser or individual who committed these acts?

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3. Where did the sexual abuse take place? Please be specific and complete all relevant information that you know, including the City and State, name of the parish or school (if applicable), and/or the names of any other location.

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4. When did the sexual abuse take place?

- a. Please be as specific as possible. If you can, please indicate the day, month, and year. If you cannot recall the month, please try to recall the season (fall, winter, spring, summer).

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- b. If you were sexually abused on more than one occasion, please state when the abuse started, when it stopped, and how many times it occurred.

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- c. Please also state your age(s) and your grade(s) in school (if applicable) at the time the abuse took place.

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5. Please describe in as much detail as possible the nature of the sexual abuse. What happened?

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6. Did you tell anyone about the sexual abuse (this would include parents, relatives, friends, the Diocese of Winona-Rochester, attorneys, counselors, and law enforcement authorities)?

- a. If "Yes," who did you tell? Please list the name(s) and any contact information you have.

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- b. What did you say?

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- c. When did you tell this person or persons about the abuse?

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- d. If you know, what did the person or persons do in response?

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7. Where there any witnesses? If so, please list their name(s) and any contact information you have, including addresses.

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8. Do you personally know or have reason to believe that the Diocese of Winona-Rochester knew that your abuser was abusing you or others before or during the period when such abuse occurred? If "Yes," please provide all information that supports your conclusion, including the information requested in items 8(a) through 8(e) below.

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- a. Who at the Diocese of Winona-Rochester knew that your abuser was abusing you or others?

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- b. How did such person or persons at the Diocese of Winona-Rochester learn this information? For example, did you report the abuse to someone from the Diocese? Did someone else tell you they reported it to someone from the Diocese? Did someone from the Diocese witness the abuse?

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- c. When did such person or persons at the Diocese of Winona-Rochester learn this information?

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- d. What exactly was the person or persons from the Diocese told or what exactly did they observe?

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- e. How did you come to have the information you provided in response to the questions above?

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**PART 5: IMPACT OF ABUSE**

**(Attach additional separate sheets if necessary)**

1. What injuries have occurred to you because of the act or acts of sexual abuse that resulted in the claim (for example, the effect on your education, employment, personal relationships, health, and any physical injuries)?

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2. Have you sought counseling or other treatment for your injuries? If “Yes,” with whom and when?

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**PART 6: ADDITIONAL INFORMATION**

1. Prior Non-Bankruptcy Claims: Have you previously filed any lawsuit seeking damages for the sexual abuse described in this claim?

☐ Yes ☐ No (if “Yes,” please answer the questions below)

- a. Where and when did you file the lawsuit?

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b. Who were the parties to the lawsuit and what was the case number?

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c. What was the result of that lawsuit?

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2. Prior Bankruptcy Claims: Have you filed any claims in any other bankruptcy case relating to the sexual abuse described in this claim?

☐ Yes ☐ No (if "Yes," you are required to attach a copy of any completed claim form)

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3. Any Settlements: Regardless of whether a complaint was ever filed against any party because of the sexual abuse, have you settled any claim or demand relating to the sexual abuse described in this claim?

☐ Yes ☐ No (if "Yes," please describe, including parties to, the settlement and you are required to attach a copy of any settlement agreement)

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4. Bankruptcy: Have you ever filed bankruptcy?

☐ Yes ☐ No (if "Yes," please provide the following information)

Name of Case: \_\_\_\_\_ Court: \_\_\_\_\_

Date Filed: \_\_\_\_\_ Case No.: \_\_\_\_\_

Chapter: ☐ 7 ☐ 11 ☐ 12 ☐ 13 Name of Trustee: \_\_\_\_\_

Date: \_\_\_\_\_

**Sign and print your name. If you are signing the claim on behalf of another person or an estate, print your title.**

**Under penalty of perjury, I declare the foregoing statements to be true and correct:**

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**EXHIBIT B**

**SEXUAL ABUSE CLAIM FILING DEADLINE NOTICE**

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA

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In re:

Diocese of Winona-Rochester,

Debtor.

Bankruptcy Case No. 18-33707  
Chapter 11 Case

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**NOTICE OF THE TIME FOR TIMELY FILING PROOFS OF CLAIMS  
RELATING TO, OR ARISING FROM, SEXUAL ABUSE**

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**THIS IS AN IMPORTANT NOTICE.  
YOUR RIGHTS MIGHT BE AFFECTED.**

**TO ALL PERSONS WITH CLAIMS ARISING FROM SEXUAL ABUSE FOR WHICH  
THE DIOCESE OF WINONA-ROCHESTER MAY BE LIABLE:**

**APRIL 8, 2019 IS THE LAST DATE TO TIMELY FILE PROOFS OF CLAIMS FOR  
SEXUAL ABUSE**

On November 30, 2018, The Diocese of Winona-Rochester (the “Diocese”) filed a voluntary petition for relief under chapter 11 of title 11 of the United States Code (the “Bankruptcy Code”) in the United States Bankruptcy Court for the District of Minnesota (the “Court”). The Diocese’s address, the case number, proof of claim form, and other relevant information related to this chapter 11 case may be obtained at <http://www.dowr.org>. Individuals have asserted sexual abuse claims against the Diocese, on account of alleged actions by people associated with the Diocese. Any person who believes that he or she has, or may have, a claim arising from sexual abuse as that term is defined in Minnesota Statutes § 541.073(1), molestation, rape, undue familiarity, sexually-related physical, psychological or emotional harm, or contacts or interactions of a sexual nature between a child and an adult, or a non-consenting adult and another adult for which such persons believe that the Diocese may be liable should carefully read this notice.

**YOU SHOULD CONSULT AN ATTORNEY IF YOU HAVE ANY QUESTIONS,  
INCLUDING WHETHER YOU SHOULD FILE A PROOF OF CLAIM.**

**LAST DATE FOR TIMELY FILING**

The Bankruptcy Court entered an order establishing April 8, 2019, as the last date for each Sexual Abuse Claimant to timely file a proof of claim. The Claim Filing Deadline and the procedures set forth below for Sexual Abuse Proof of Claim Forms apply to all Sexual Abuse Claims against the Diocese, based upon alleged acts of sexual abuse occurring prior to November 30, 2018.

### **WHO SHOULD FILE**

If you believe that you have a Sexual Abuse Claim, you should file a Sexual Abuse Proof of Claim to maintain and preserve any claims that you have against the Diocese. Even if you have already filed a lawsuit against the Diocese alleging sexual abuse prior to November 30, 2018, you should still file a Sexual Abuse Proof of Claim Form to maintain and preserve your rights in the Diocese's chapter 11 case.

### **WHO SHOULD NOT FILE**

You should not file a Sexual Abuse Proof of Claim Form if:

Your Sexual Abuse Claim has already been paid in full OR

You do not have a claim against the Diocese.

### **WHAT TO FILE**

**FILE A SEXUAL ABUSE PROOF OF CLAIM FORM, A COPY OF WHICH IS ENCLOSED. YOU MAY ALSO OBTAIN A COPY OF THE SEXUAL ABUSE PROOF OF CLAIM FORM BY FOLLOWING THE INSTRUCTIONS BELOW:**

### **PROCEDURES FOR FILING A SEXUAL ABUSE PROOF OF CLAIM FORM**

To file a Sexual Abuse Proof of Claim Form, take the following steps:

Fill out the Sexual Abuse Proof of Claim Form in its entirety.

For additional copies of the Sexual Abuse Proof of Claim Form: (a) photocopy the Sexual Abuse Proof of Claim Form; (b) contact the Diocese between the hours of 9:00 a.m. and 5:00 p.m. (Central Standard Time), Monday through Friday; (c) visit the Diocese's website at: <http://www.dowr.org>; or (d) visit the website of the Bankruptcy Court at <http://www.mnb.uscourts.gov/>.

**Please note that the Court's Clerk's staff is not permitted to give legal advice. You should consult your own attorney for assistance regarding any such inquiries.**

Return the completed original Sexual Abuse Proof of Claim Form to the Bankruptcy Court Clerk at the address set forth below by the Claim Filing Deadline. Sexual Abuse Proof of Claim Forms will be deemed timely filed only if they are **actually received** by the Clerk of Court by **April 8, 2019**.

If you are returning a Sexual Abuse Proof of Claim Form by mail, allow sufficient mailing time so that the Sexual Abuse Proof of Claim Form is received on or before **April 8, 2019**. Sexual Abuse Proof of Claim Forms that are postmarked before that date, i.e., the Claim Filing Deadline, but which are received by the Clerk of the Court after the Claim Filing Deadline, will be considered tardy.

Sexual Abuse Proof of Claim Forms should be delivered to the following address: Clerk of Court

U.S. Bankruptcy Court District of Minnesota  
200 Warren E. Burger Federal Building and United States Courthouse  
316 North Robert Street  
St. Paul, MN 55101  
Attention: Barbie

### **CONSEQUENCES OF FAILURE TO FILE A PROOF OF CLAIM**

There may be consequences for failing to file a claim. Please consult your attorney.

### **CONFIDENTIALITY**

Filed Sexual Abuse Proof of Claim Forms will remain confidential in this chapter 11 case, unless you elect otherwise in Part 1 of the Sexual Abuse Proof of Claim Form. Therefore, the Sexual Abuse Proof of Claim Form that you file will not be available to the general public, but will be kept confidential, except that information will be provided to the Diocese, the United States Trustee for the District of Minnesota, the Diocese's insurers, attorneys for the Official Committee of Unsecured Creditors and its members, any unknown claims representative appointed by the Bankruptcy Court, any settlement trustee appointed to administer payments to Sexual Abuse Claimants, prison authorities for any incarcerated Sexual Abuse Claimants, and such other persons as the Court determines should have the information in order to evaluate the Sexual Abuse Claim, all of whom will agree to keep the information provided by you confidential.

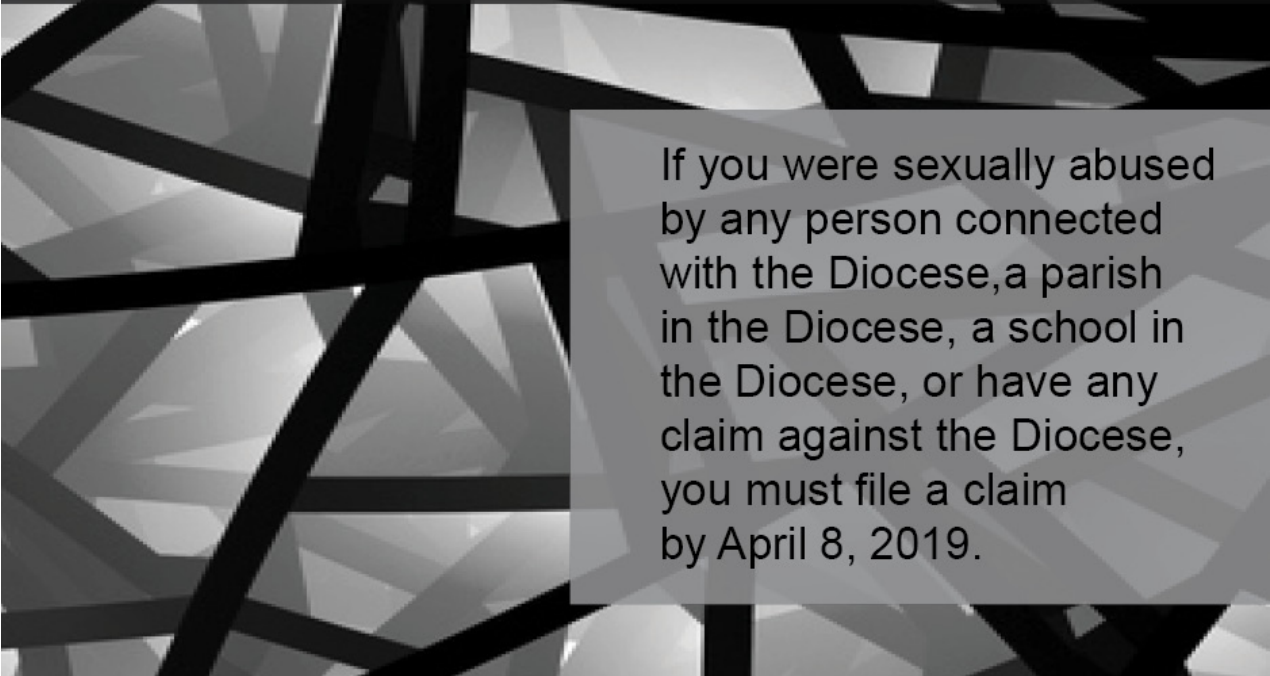
Dated: \_\_\_\_\_, 2018

**EXHIBIT C**

**PUBLICATION NOTICE**

*United States Bankruptcy Court for the District of Minnesota  
In re Diocese of Winona-Rochester, Case No. 18-33707*

## **DIOCESE OF WINONA-ROCHESTER**



If you were sexually abused by any person connected with the Diocese, a parish in the Diocese, a school in the Diocese, or have any claim against the Diocese, you must file a claim by April 8, 2019.

For more information, visit [www.dowr.org](http://www.dowr.org)

For U.S. Bankruptcy Court for the District of Minnesota information, visit [mnb.uscourts.gov](http://mnb.uscourts.gov)

For advice about your rights, contact an attorney